

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT, AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN
DATE RECEIVED
SEP 07 2012
Bayfield Co. Zoning Dept.
\$150
ENTERED
Permit #: 12-03402
Date: 9-14-12
Amount Paid: \$150.00
Refund: 7/11/12

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning.asp)

TYPE OF PERMIT REQUESTED: ☒ LAND USE ☐ SANITARY ☐ PRIVATE ☐ CONDITIONAL USE ☐ SPECIAL USE ☐ B.O.A. ☐ OTHER

Owner's Name: Richard & Sally Bond
Address of Property: 5831 Schwann Dr Fitchburg, WI 53711
City/State/Zip: Cable WI 54881
Telephone: 608 347-1308
Cell Phone: 347-1308

Contractor: Dick Biscobing Builders
Contractor Phone: 788-3653
Plumber: 788-3653
Plumber Phone: 788-3653

Authorized Agent: (Person Signing Application on behalf of Owner(s))
Agent Name: Richard Biscobing
Agent Phone: 788-3653
Agent Mailing Address (include City/State/Zip):
Written Authorization Attached: ☒ Yes ☐ No

PROJECT LOCATION: Legal Description: (Use Tax Statement)
P.L.N.: (23 digits) 04-034-2-43-06-23-2 00-654-1904
Volume 1064
Page(s) 851

1/4, 1/4 Gov't Lot Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Subdivision: Lot Size Acreage
1/4, 1/4 1.681

Section 23, Township 43 N, Range 6 W Town of: Numa Kager

☒ Shoreland ☐ Non Shoreland

☐ Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? ☐ If yes--continue -->
☒ Is Property/Land within 1000 feet of Lake, Pond or Flowage ☐ If yes--continue -->

Distance Structure is from Shoreline: feet
Distance Structure is from Shoreline: 250+ feet
Is Property in Floodplain Zone? ☒ Yes ☐ No
Are Wetlands Present? ☒ Yes ☐ No

Value at Time of Completion * include donated time & material	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
\$2,000	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input checked="" type="checkbox"/> 2-Story	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists)	Specify Type: <u>Comu</u>	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)		
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)		
		<input type="checkbox"/> Foundation	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it) Length: 6' Width: 6' Height: 10'

Proposed Construction: Length: 8' Width: 8' Height: 10'

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	()	
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	()	
	with Loft	()	
	with a Porch	()	
	with (2 nd) Porch	()	
	with a Deck	()	
	with (2 nd) Deck	()	
<input type="checkbox"/> Commercial Use	with Attached Garage	()	
	Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities	()	
	Mobile Home (manufactured date)	()	
	<input checked="" type="checkbox"/> Addition/Alteration (specify) <u>enlarge entry porch</u>	(8' x 8')	64 ft
	<input type="checkbox"/> Accessory Building (specify)	()	
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	()	
<input type="checkbox"/> Municipal Use		()	
	Special Use: (explain)	()	
	Conditional Use: (explain)	()	
	Other: (explain)	()	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): (if there are Multiple Owners listed on the Deed ALL Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Richard A Biscobing Date: 9/6/12

Rec'd for Issuance 42420 Woodcrest Dr, Cable WI Attach
Address to send permit 54821 Copy of Tax Statement

SEP 14 2012

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Secretarial Staff

Bond Lean-to & Entry

Print Date: 09/07/2012
Image Date: 04/23/2009
Level: Neighborhood



SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN
Date Stamp (Received)
SEP 07 2012

Permit #: 12-0364/ENR/ED
Date: 9-14-12
Amount Paid: \$5,000.00
Refund: 9/3/12

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER					
Owner's Name: Richard & Sally Bond		Mailing Address: 5831 Schwann Dr. Fitchburg, WI		Telephone: 608 347-1308	
Address of Property: 23172 Garwisch Rd. Unit 19		City/State/Zip: Cable, WI 54821		Cell Phone:	
Contractor: Bischoff Builders		Contractor Phone: 798-3653		Plumber Phone:	
Authorized Agent: Person Signing Application on behalf of Owner(s) Richard Bischoff		Agent Phone: 798-3653		Agent Mailing Address (include City/State/Zip):	
PROJECT LOCATION: 1/4, 1/4		PIN: (23 digits) 04-034-3-43-06-23-2 00-654-1000		Recorded Document: (i.e. Property Ownership) Volume 1064 Page(s) 851	
Gov't Lot		Lot(s)		CSM	
Vol & Page		Lot(s) No.		Block(s) No.	
Subdivision:		Lot Size		Acreage 1.691	
Section 23, Township 43 N, Range 6 W		Town of: Newkagon			

<input checked="" type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline: feet	Is Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Non-Shoreland	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline: 250 ft feet		

Value at Time of Completion * include donated time & material \$3,500	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> Year Round	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> 2-Story	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input checked="" type="checkbox"/> Well
<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: Clay	<input type="checkbox"/>
<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> No Basement	<input checked="" type="checkbox"/> Foundation	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	
<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> Foundation	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	

Existing Structure: (if permit being applied for is relevant to it)	Length: 12	Width: 24	Height: 10
Proposed Construction:			

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	() X)	
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	() X)	
	with Loft	() X)	
	with a Porch	() X)	
	with (2 nd) Porch	() X)	
	with a Deck	() X)	
	with (2 nd) Deck	() X)	
<input type="checkbox"/> Commercial Use	with Attached Garage	() X)	
	Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	() X)	
	Mobile Home (manufactured date)	() X)	
<input type="checkbox"/> Municipal Use	Addition/Alteration (specify)	() X)	
	Accessory Building (specify)	() X)	
	Accessory Building Addition/Alteration (specify) lean-to	(12 x 24)	288
	Special Use: (explain)	() X)	
	Conditional Use: (explain)	() X)	
	Other: (explain)	() X)	

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Owner(s): (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
Authorized Agent: Richard A. Bond Date Sept 6/12
Rec'd for Issuance 22420 Woodcrest Dr. Cable WI 54821
Address to send permit SEP 14 2012
Attach Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Secretarial Staff

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Bond Lean-to & Entry

Print Date: 09/07/2012
Image Date: 04/23/2009
Level: Neighborhood

